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Ophthalmic Literature

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Ophthalmic Literature

VOL. VII. JULY, 1917. NO. 7.

Edited by EDWARD JACKSON. Assisted by WILLIAM H. CRISP.

THE NEW JOURNAL.

Beginning with January, 1918, there will be published a new monthly ophthalmic journal. It will combine: The Annals of Ophthalmology, The Ophthalmic Record, Ophthalmology, The Ophthalmic Year Book and Ophthalmic Literature.

There is also reason to expect that at least one other ophthalmic journal will enter into this merger. Besides producing a better ophthalmic journal, the consolidation thus brought about will avoid most of the duplication of matter that has heretofore been so noticeable in the periodical literature of ophthalmology published in the English language.

This journal will be published primarily in the interests of the ophthalmologists who read it. Every suggestion that tends to the more perfect attainment of this object will be welcomed. It will not be published simply to furnish some writer or group of writers a medium of publication. It will not meet the request of one skeptic that it should give the writer a "guarantee that one paper a year would be published if desired." But it will publish as many articles each year as any author will write provided they are of important interest to the ophthalmologist, clearly written, and as brief as the presentation of the main thought permits.

To the authors of such papers this journal will bring a wider circle of interested readers than they could obtain through any other channel. In the list of journals given above are the three that have today the largest lists of subscribers of any ophthalmic journals published in America. The new journal will probably start with the largest list of subscribers of any ophthalmic journal published in the world; and it will offer its contributors the best presentation of their papers, both as to paper, presswork, proofreading and illustrations, that it is possible to secure in America.

The journal will be controlled by its readers. It will be owned by a corporation in which it is hoped that the largest possible number of ophthalmologists will hold stock and join in choosing its managers. Special provision will be made to prevent the stock from becoming of speculative value, and to secure that it shall always remain in the hands of ophthalmologists. It is believed that the close touch and sense of proprietorship, that have contributed so much to the phenomenal success of the Journal of the American Medical Association and of the journals of the stronger state medical societies, can be made even more effective for a special journal, whose readers share more closely in thought and sympathy with one another, and have more of common interest than have the readers of a general medical journal.

This journal will invite the assistance and active support of every one who desires to do good literary work in the domain of ophthalmology. Not only will the workers on the editorial staffs of the present journals be brought together and organized, but those who have heretofore had no such connections will be invited to share in the labor of producing this ophthalmic journal. The conditions attached to such a connection will be that each collaborator shall be an honorable member of the profession; that he shall be able to do the work he undertakes; that he shall endeavor to do the best work he is capable of, and be ready to learn how it may be done better.

In pursuance of a policy of calling out all the resources of the profession we ask now for criticisms of the features of existing journals that are desirable or undesirable to perpetuate, and especially positive suggestions with regard to the new undertaking. These will be placed before those who are to be charged with their execution, and they will be carefully considered. They cannot all be adopted, but they may all contribute something to a broader view of the needs and possibilities of an ophthalmic journal to be developed by and for the ophthalmologists of America.

WAR BALANCES.

The change of activities brought about by war works for efficiency in some directions, but for deterioration in others. The speeding up in certain activities seems to produce marvelous progress, as in aviation or business organization. The general rise of prices produces prosperity in certain directions. But the energy manifested in new channels is not wholly a new creation. It is largely diverted from other fields of usefulness; and the rising prices bear heavily upon certain lines of production.

Medical journalism feels the strain and harm of war in many ways. Fewer papers are written. It is even difficult to fill well the programs of the established medical societies; and the rising prices of paper and other materials, and of labor, are emphasized by a loss of subscribers. Not only does the supply of new subscribers fail; many of the old ones, drawn into war, cease to help sustain the journals, while advertisers cut down their expenditures as their business shrinks, or they are unable to meet orders that come to them.

Under these conditions the medical journal must do one of two things: it must diminish its output or deteriorate. The ophthalmic journals have generally done the former. Some, as the English, have combined; some like the **Index of Oto-Laryngology**, have issued their numbers at longer intervals; others, like **Ophthalmic Literature**, have cut down the size of each issue. By the latter course we are able to give as efficient service as ever; but of course the reduced volume of the literature to be noticed gives the subscriber less for his money, and has the effect of a raise in price.

BOOK NOTICES.

Bolletin de la Sociedad de Oftalmologia de Buenos Aires, vol. 4, No. 4, 1917. 8vo. 435 pages. 16 plates. Published by the Society; Dr. Hector Rebay, secretary.

This fourth annual volume is a more impressive book that its predecessors. It contains in addition to the papers presented to the Ophthalmological Society of Buenos Aires those relating to ophthalmology of the National Medical Congress of Buenos Aires, and the addresses in honor of Prof. Pedro Lagleyze, whose death occurred one year ago. There are in all twenty-four scientific papers, many of them of high value and abundantly illustrated.

In the addresses in honor of Prof. Lagleyze we find a brief account of his life and bibliography of his writings. He had the opportunity—and used it well—to lead the ophthalmologists of Argentina into organization and higher scientific activity. This volume also contains a valuable history of ophthalmology in Buenos Aires by Argañaraz. This covers about 138 pages, and one-half of it is devoted to bibliographic notes.

Among the topics that receive especial attention in this volume are conjunctivitis of various kinds and ocular parasitic diseases. But the papers cover a wide range of fundamental and clinical subjects. They are noticed under the appropriate heads in this month's Index of Ophthalmology.

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Cirincione, S. Operative Contribution to Endorbital Osteomata. (Annali di Ottalmologia e Clinica Oculistica. First year, page 81.)

The first patient was a man of 25 years who had noticed for five years that the left eye gradually became more prominent than the other, and in the same period that the vision of the left eye had gradually diminished. The left eye protruded 1 centimeter and was pushed 5 millimeters down and slightly outward. The vision was 1/10, not improved with lenses. The size of the tumor had apparently been stationary for three years. Operation was therefore done chiefly for cosmetic purposes. An incision was made along the upper inner orbital margin. The elevator of the upper lid was separated from the periosteum and displaced downward. The tumor consisted of two large lobes, each of the volume and shape of a medium-sized chestnut, implanted on a broad base in the upper inner wall of the orbit. The tumor was of eburnated hardness, and at some points was broken into fragments in the course of the operation. At the end of two years after the operation there persisted a very slight degree of ptosis, only visible when the eye was directed upward, and a strabismus of 10 degrees only. There was no sign of recurrence of the tumor.

The second patient was a girl of 16 years. A disturbance of vision of the left eye had been noticed for three years, and for the same length of time a small hard swelling at the upper inner angle of the orbit. The tumor had increased in size without pain. The eyeball was pushed forward 3 millimeters and turned outward 30 degrees. The vision of this eye was two-thirds of the other eye, normal. The tumor, which was of the volume of a small cherry, somewhat flattened from before backward, appeared to have taken the place of the pulley of the superior oblique muscle. After dissecting free the tendon of the muscle, the tumor was easily chiseled from its attachment to the wall of the orbit. Microscopically it was found to consist superficially of compact bone tissue, and internally of spongy bone tissue.

In the third case, that of a man of 21 years, the protrusion of the eyeball had been first noticed four years previously. The posterior pole of the eyeball was in the same plane with the orbital margin. The displacement was 2 centimeters downward and 3 centimeters outward; nevertheless, the eyeball was covered by the upper lid. At operation almost the entire orbit was found to be filled with an extremely hard bony mass which was immovable and formed an integral part of the orbital walls. The operation practically consisted in excavating a new orbital cavity in the bony mass. A radiograph showed a tumor mass not merely extending from the wall of the orbit toward the eyeball, but also upward into the brain cavity. In the orbit the bony mass had taken the place of the superior orbital walls, and also of the orbital portion of the superior maxillary bone and partly of the large and small wings of the sphenoid bone. At the time of reporting three years had elapsed since the operation, and no change had taken place in the position of the eyeball as compared with that which it occupied in the new orbital cavity shortly after the operation.

Kirkpatrick, H. Retinitis Pigmentosa, Trephining. (Report Government Ophthalmic Hospital, Madras, 1916, pp. 12, 13.)

Of fifteen cases of retinitis pigmentosa presenting during the year, first-cousin marriage had occurred in more than one generation for six patients, for at least one generation in two, and in five first-cousin marriage was the family custom, though the patient stated that his own parents were not related.

Twelve eyes were trephined for retinitis pigmentosa, and the results were on the whole encouraging. In three patients who each had one eye trephined both the vision and the night blindness were improved; in one the vision improved but the night blindness remained unaltered, and in another the night blindness was improved but the vision unaltered. Thus five patients were improved, three markedly so. The remaining seven eyes were in five patients. These were unaltered, but four of the eyes in two patients were blind before operation.

Villasevaglios, G. Röentgen Rays in the Diagnosis of Ocular Diseases. (Archivio di Ottalmologia, twenty-third year, page 461.)

This noteworthy monograph occupies one hundred and sixty pages. It is well illustrated and is accompanied by a good bibliography. The author remarks that so far as he knows no one has hitherto assembled in a monograph the numerous studies which have appeared in various publications concerning radio-diagnosis of ocular affections.

The first part of the monograph discusses the theories and the technique of employment of the Röentgen rays in ophthalmology, including the apparatus in general use. The second part considers in a series of chapters the affections which may be recognized by means of the X-rays. The chapters are grouped as follows:

(1) Intracranial processes and anomalies of formation of the cranium which determine atrophy of the optic nerve, dealing particularly with the tumors and affections which increase the cerebral pressure, with the affections of the hypophysis, and with cranial deformities, particularly the oxycephalic syndrome.

(2) Lesions of continuity of the orbital walls and of the base of the cranium, which produce ocular changes, such as atrophy of the optic nerve, muscular paralyses, etc.

(3) Anomalies of shape, destructions, hyperostoses and other tumors of the orbital walls.

(4) Diseases of the sinuses which may be in relation with the orbit (frontal sinuses, ethmoids, etc.).

(5) Foreign bodies of the eyeball and of the orbit.

Eight personal cases reported with the paper include one of hypophyseal tumor, one of acromegaly, one of oxycephaly, one of tumor of the inner lateral region of the left orbital cavity, one of tumor of the left frontal sinus, one of sinusitis and two of metallic foreign bodies.

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Though the book is somewhat larger than in preceding years, the size of the single abstract has not become too long. The amount of labor which a book of this kind entails cannot be comprehensible to one without personal experience in abstracting, and the mere arrangement of the reviews is no light task. The editor and his collaborators deserve our gratitude; and any support that we can furnish to the project by subscribing should be unhesitatingly given.—Archives of Ophthalmology, v. 45, Jan.

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